

—As members of the health team, the coordinators enlist and teach nurses to enlist the services of other members, such as pharmacists and dietitians, to meet the educational needs of patients. Appropriate hospital and community services are coordinated to meet the specific needs of the individual patient and family. As members of the Discharge Planning Committee, the coordinators work with the Social Service in planning for a patient's discharge and providing continuity of care following discharge.

—The coordinators are resource persons for the community by being actively engaged with many programs—the Heart Association, American Cancer Society, and

others. Other activities include guest lecturing to nursing students at the neighboring university and at the technical college.

The patient education coordinators are charged with maintaining an updated knowledge in health education and medical research, attending and participating in seminars on patient care, evaluating and recommending patient education materials, and obtaining or developing new patient-teaching aids.

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NATIONAL HIGH BLOOD PRESSURE EDUCATION PROGRAM RESULTS

■ The National High Blood Pressure Education Program, established in 1972, has already progressed toward its goal of alerting the medical community and the public to the prevalence of high blood pressure in the U.S. population, the dangers of uncontrolled hypertension, and the health benefits of adequate blood pressure control.

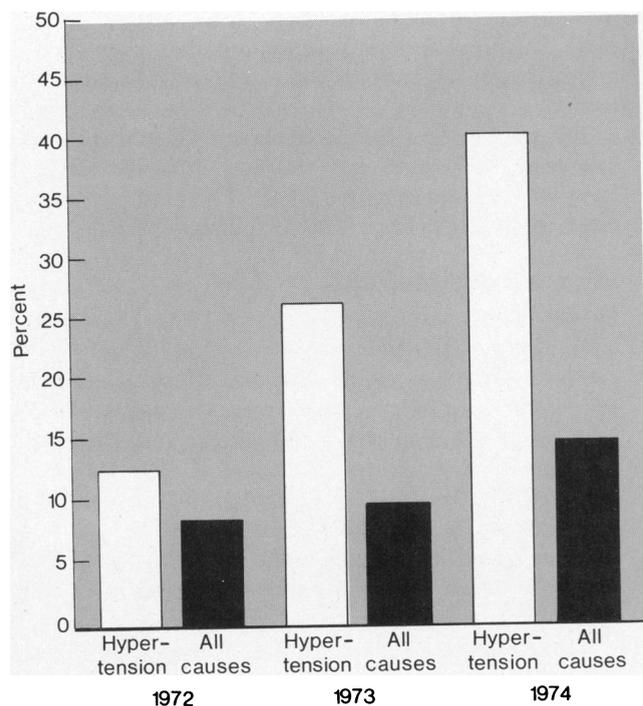
Data released by the program's coordinating committee indicate that in recent years there have been sharp increases in initial and total patient visits to physicians for hypertension and hypertensive heart disease, a substantial reduction in the number of people with unsuspected and un-

diagnosed hypertension, and a significant increase in the number of hypertensive patients whose blood pressure is under adequate medical control.

The program's wide variety of education, research, planning, and community service activities are coordinated by the National Heart and Lung Institute (NHLI) and involve more than 150 national organizations—Federal, private, and professional.

Except for arteriosclerosis, hypertension is the most common cardiovascular disease, affecting some 23 million American adults. Though potentially serious, it seldom produces symptoms discernible to the person who has it. Easily diagnosed and in most cases readily controlled, it is often unsuspected or inadequately treated. Many who have the disease ignore it.

Percentage increase over 1971 in patient visits for all causes and for hypertension and hypertensive heart disease, 1972-74



SOURCE: National Disease and Therapeutic Index 1964-74.

Initial Visits

Data based on the National Disease and Therapeutic Index indicate that since 1971, initial patient visits to physicians for hypertensive heart disease have increased 38 percent, and total patient visits for these conditions have increased more than 40 percent. Both are greater increases than initial and total physician visits for all causes, which rose about 17 percent.

Data were also summarized from three other surveys: the National Health Examination Survey of 1960-62, the National Health and Nutrition Survey of 1971, and the NHLI Hypertension Detection and Followup Study (HDFP) done in 1973-74. The two earlier surveys indicated that nearly half of those with high blood pressure were unaware that they had it. In the 1973-74 community survey, this proportion was only 29 percent.

If the national situation is similar to that observed in the 14 communities participating in the HDFP study, some 4 million people have become aware since 1971 that they have high blood pressure—the first step to effective treatment. The two earlier surveys indicated that among the 12 million or so people who knew of their hypertension, only about 4 million had their disease under adequate control. By 1973-74, the number of hypertensive patients receiving effective treatment had more than doubled, reaching 9 million.

Over the 14-year span covered by the three surveys, the number of persons aware of their hypertension but not under treatment for it did not change appreciably.